



PCR # \_\_\_\_\_

Date \_\_\_\_\_

**SPECIAL USE PERMIT**

City of Williamsburg

401 Lafayette Street

Williamsburg, VA 23185-3617

(757) 220-6130 FAX: (757) 220-6109

Applicant \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Phone/Fax Number \_\_\_\_\_

Owner \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Phone/Fax Number \_\_\_\_\_

\*\*\*\*\*

Representative \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Phone/Fax Number \_\_\_\_\_

\*\*\*\*\*

Location of Request \_\_\_\_\_

Tax Map Number \_\_\_\_\_

Zoning \_\_\_\_\_

Proposed Special Use \_\_\_\_\_

\*\*\*\*\*

I/We, as (Owner) (Contract Purchaser with Owner's Written Consent) (Owner's Agent) of the property mentioned above, hereby petition the Williamsburg City Council to approve the above described special use.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name of Applicant

Sworn before me this \_\_\_\_ day of \_\_\_\_\_

\_\_\_\_\_  
Notary

\_\_\_\_\_  
Commission Expiration

\*\*\*\*\*

Statement by Applicant

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Planning Commission Public Hearing \_\_\_\_\_

Date

Planning Commission Action

\_\_\_\_\_  
Action Date

\*\*\*\*\*

City Council Public Hearing \_\_\_\_\_

Date

City Council Action